

## FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

CJA 23  
(Rev. 5/98)IN UNITED STATES  
IN THE CASE OF☐ MAGISTRATE☒ DISTRICT☐ APPEALS COURT or☐ OTHER PANEL (Specify below)

2-22-08 LOCATION NUMBER

FEB 22 2008

PERSON REPRESENTED (Show your full name)

Paul Porter

MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

DOCKET NUMBERS

District Court

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box → ☒ Felony  
☐ Misdemeanor

- ☒ Defendant - Adult  
☐ Defendant - Juvenile  
☐ Appellant  
☐ Probation Violator  
☐ Parole Violator  
☐ Habeas Petitioner  
☐ 2255 Petitioner  
☐ Material Witness  
☐ Other (Specify)

08 CR 153

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY-  
MENTAre you now employed? ☐ Yes ☒ No ☐ Am Self Employed

Name and address of employer:

IF YES, how much do you  
earn per month? \$IF NO, give month and year of last employment 3 mos ago  
How much did you earn per month? \$ 7.00If married is your Spouse employed? N/A ☐ Yes ☐ NoIF YES, how much does your  
Spouse earn per month? \$If a minor under age 21, what is your Parents or  
Guardian's approximate monthly income? \$OTHER  
INCOMEHave you received within the past 12 months any income from a business, profession or other form of self-employment, or in the  
form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☒ Yes ☐ NoIF YES, GIVE THE AMOUNT  
RECEIVED & IDENTIFY \$  
THE SOURCES

RECEIVED

\$593

\$80

SOURCES

SSJ - disability  
food stamps

## CASH

Have you any cash on hand or money in savings or checking account ☐ Yes ☒ No IF YES, state total amount \$PROP-  
ERTYDo you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household  
furnishings and clothing)? ☐ Yes ☒ NoIF YES, GIVE THE VALUE AND \$  
DESCRIBE IT

VALUE

DESCRIPTION

## DEPENDENTS

MARITAL STATUS

☐ SINGLE☐ MARRIED☐ WIDOWED☒ SEPARATED OR  
DIVORCEDTotal  
No. of  
Dependents

3

OBLIGATIONS  
& DEBTSDEBTS &  
MONTHLY  
BILLS(LIST ALL CREDITORS,  
INCLUDING BANKS,  
LOAN COMPANIES,  
CHARGE ACCOUNTS,  
ETC.)APARTMENT  
OR HOME

Creditors

Total Debt

Monthly Payt.

rent  
Utilities  
Food

Illinois cash advance loan

\$

\$

\$

\$

\$

\$

\$

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\$

\$

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 2/22/08

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

Paul Porter